

## Hospital bans free drug samples

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The University of Wisconsin Hospital, the largest health care provider in Madison, has instituted a voucher program to replace free samples from drug companies. Samples have been banned from the hospital.

Vouchers issued to cash- and co-paying patients at the hospital cover part of the cost of their prescription drugs. Participating drug manufacturers reimburse the hospital pharmacy for brand name drugs, but the hospital pays for generic drugs. The hospital hopes that its voucher program will increase the prescribing of generic medicines.

For years, physicians have received “free” samples of prescription drugs from pharmaceutical companies. There is evidence that the

availability of samples leads physicians to dispense and subsequently to prescribe drugs that differ from their preferred drug choice (*J Gen Intern Med* 2000;15:478-483). The physician campaign group No Free Lunch ([www.nofreelunch.org](http://www.nofreelunch.org)) believes that samples are given out as a deliberate marketing ploy (see p 232).

IMS Health, a drug research firm in Plymouth Meeting, PA, found that drug companies handed out 766 million samples in 1999, or an average of 1,500 for each practicing physician. This amounted to several billions of dollars in free drugs across the nation.

Schering Plough, for example, distributed

35.7 million samples of Claritin, an antihistamine that costs \$68 for a month's supply. The same amount of the generic antihistamine chlorpheniramine costs 62 cents.

Lee C Vermeulen, director of the Center for Drug Policy and Clinical Economics at the University of Wisconsin, which controls drug costs for the hospital, said that the university expects to save up to \$1.2 million in lower drug costs for its insurers through the voucher scheme. The scheme will cost only \$123,000.

Other health care providers have successfully replaced drug samples with vouchers. Since 1998, the 185-physician Everett Clinic in Washington State has run a voucher pro-

gram that it believes has enabled prescribers to provide greater help to the uninsured and financially impoverished.

The American Society of Health-System Pharmacists opposes giving out free drug samples. This practice, it believes, leads to patients receiving improperly labeled and packaged drugs, or drugs that are outdated or unrecorded, and gives unauthorized and untrained personnel greater access to prescription drugs. Samples, it feels, may also encourage inappropriate prescribing habits or may

increase the cost of treatment for all patients.

The Joint Commission on Accreditation of Hospitals says that 1 of the top 10 abuses of its standards is lax documentation of drug samples in hospital-based practice. The commission has no opposition to the voucher system but says it is not the only acceptable system for handling sample medications.

The American Medical Association (AMA) continues to endorse giving out free samples. As recently as last year, the practice received the blessing of the AMA house of

delegates. Its policy on samples (H-120.991) states:

The AMA (1) continues to support the voluntary time-honored practice of physicians providing drug samples to selected patients at no charge; (2) reiterates that samples of prescription drug products represent valuable benefits to the patients; (3) continues to support the availability of drug samples directly to physicians through manufacturers' representatives and other means with appropriate safeguards.

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